

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

684,10002

## CLAIMS AS FILED - PART I

|   | (Column 1)    | (Column 2)   |
|---|---------------|--------------|
| TOTAL CLAIMS  | 19            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 19 minus 20 = | *            |
| INDEPENDENT CLAIMS  | 4 minus 3 =   | 1            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

|   | (Column 1) | (Column 2)                         | (Column 3)    |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | Minus      | **                                 | =             |
| Independent   | Minus      | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                    |               |

|   | (Column 1) | (Column 2)                         | (Column 3)    |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | Minus      | **                                 | =             |
| Independent   | Minus      | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                    |               |

|   | (Column 1) | (Column 2)                         | (Column 3)    |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | Minus      | **                                 | =             |
| Independent   | Minus      | ***                                | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                    |               |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

## SMALL ENTITY TYPE ☐

## OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 355.00 |
| X\$ 9=    |        |
| X40=      | 40     |
| +135=     |        |
| TOTAL     | 395    |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 710.00 |
| X\$18=    |        |
| X80=      |        |
| +270=     |        |
| TOTAL     |        |

## SMALL ENTITY TYPE ☐

## OR OTHER THAN SMALL ENTITY

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X40=   |                |
| +135=  |                |
| TOTAL  |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X80=   |                |
| +270=  |                |
| TOTAL  |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X40=   |                |
| +135=  |                |
| TOTAL  |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X80=   |                |
| +270=  |                |
| TOTAL  |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$ 9= |                |
| X40=   |                |
| +135=  |                |
| TOTAL  |                |

| RATE   | ADDITIONAL FEE |
|--------|----------------|
| X\$18= |                |
| X80=   |                |
| +270=  |                |
| TOTAL  |                |